Applicant's Signature: _

Development Services Department,531 "K" Street, Eureka, CA 95501,(707) 441-4160 www.ci.eureka.ca.gov

Supplemental Application Form

The Eureka Municipal Code allows Reasonable Accommodations to be requested for persons with disabilities seeking equal access to housing under the Federal Fair Housing Act and the California Fair Employment and Housing Act in the application of zoning laws and other land use regulations, policies, and procedures. Please complete the form below; you may attach additional sheets or documentation, if necessary. If you have questions regarding this Supplemental Application Form, the application process, or general planning questions, please do not hesitate to contact the Community Development Division at the address and phone number shown above. Office hours are Monday - Friday 8:30 a.m. - 4:00 p.m.

Applicant's Name:
Address where accommodation is requested:
Describe the requested modification and/or exception to the regulations, policies, or procedures:
Provide the reason(s) that the requested Accommodation is necessary for the individual with a disability to use and enjoy the dwelling:
If we have questions about your request for reasonable accommodation and you would like us to contact someone assisting you with this request, instead of you, please provide that person's name, address and telephone number:
Name
Address
Phone No.

Please attach any documents you think support the request for Reasonable Accommodation and would assist the City in considering your request.

Please indicate what information, if any, is confidential.

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